

IN THE U.S. PATENT AND TRADEMARK OFFICE
Patent Application Transmittal Letter

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

17497 U.S. PTO
10/699893

Sir:

Transmitted herewith for filing under 37 CFR 1.53(b) is a(n): ☒ Utility ☐ Design

☒ original patent application,
☐ continuation-in-part application

INVENTOR(S): McGarry et al.

TITLE: PRINTING SYSTEM

Enclosed are:

- ☒ The Declaration and Power of Attorney. ☒ signed ☐ unsigned or partially signed
☒ 4 sheets of drawings (one set) ☐ Associate Power of Attorney
☐ Form PTO-1449 ☒ Information Disclosure Statement and Form PTO-1449
☐ Priority document(s) ☐ (Other) (fee \$)

CLAIMS AS FILED BY OTHER THAN A SMALL ENTITY				
(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) TOTALS
TOTAL CLAIMS	— 20	0	X \$18	\$ 0
INDEPENDENT CLAIMS	— 3	0	X \$86	\$ 0
ANY MULTIPLE DEPENDENT CLAIMS	0		\$290	\$ 0
BASIC FEE: Design (\$340.00); Utility (\$770.00)				\$ 770
TOTAL FILING FEE				\$ 770
OTHER FEES				\$
TOTAL CHARGES TO DEPOSIT ACCOUNT				\$ 770

Charge \$ 770 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

"Express Mail" label no. EV 227050346 US

Date of Deposit 11/03/2003

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, Alexandria, VA 22313-1450.

By Karen Meier
Typed Name: Karen Meier

Respectfully submitted,

McGarry et al.

By Todd A. Rathe
Todd A. Rathe

Attorney/Agent for Applicant(s)
Reg. No. 38,276

Date: 11/03/2003

Telephone No.: (414) 297-5710